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OFFICIAL

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FROM: Winston Hsu, PATENT AGENT, REG. NO. : 41,526

SERIAL NO.: 10/063,885

ATTORNEY DOCKET NO.: CEIP0041USA

SUBJECT: RESPONSE TO OFFICE ACTION MAILED
ON 02/26/2004

TOTAL PAGES: 12PAGES (INCLUDING COVER PAGE)

Winston Hsu 2004/05/13

CEIP0041USA0_A2_2

PTO/SB/97 (08-00)
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APPLICATION NUMBER: 10/063,885

PAPERS INCLUDED:

| | |
|-----------------------------------|---------|
| (1) Transmittal Form | 1 PAGE |
| (2) Fee Transmittal | 1 PAGE |
| (3) Response to the Office Action | 8 PAGES |

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PTO/SB/21 (08-03)

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| | | |
|---|------------------------|-----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/063,885 |
| | Filing Date | 05/21/2002 |
| | First Named Inventor | Ko-Chien Chuang |
| | Art Unit | 2182 |
| | Examiner Name | Perveen, Rehana |
| | Attorney Docket Number | CEIP0041USA |
| Total Number of Pages in This Submission | | 10 |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm or Individual name | Winston Hsu, Reg. No.: 41,526 | |
| Signature | <i>Winston Hsu</i> | |
| Date | 5/12/2004 | |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
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| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Typed or printed name | | | |
| Signature | | Date | |

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0851-0032
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FEE TRANSMITTAL
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | 10/063,885 |
| Filing Date | 05/21/2002 |
| First Named Inventor | Ko-Chien Chuang |
| Examiner Name | Perveen, Rehana |
| Art Unit | 2182 |
| Attorney Docket No. | CEIP0041USA |

| | | | |
|---|----------------------------|--|----------|
| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None | | 3. ADDITIONAL FEES | |
| <input checked="" type="checkbox"/> Deposit Account: | | Large Entity Small Entity | |
| Deposit Account Number: 50-3105 | | Fee Code (\$) | |
| Deposit Account Name: North America Intellectual Property Corp. | | Fee Code (\$) | |
| The Director is authorized to: (check all that apply) | | Fee Description | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments | | Fee Paid | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) | | | |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | |
| FEE CALCULATION | | | |
| 1. BASIC FILING FEE | | | |
| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
| 1001 770 | 2001 385 | Utility filing fee | |
| 1002 340 | 2002 170 | Design filing fee | |
| 1003 530 | 2003 285 | Plant filing fee | |
| 1004 770 | 2004 385 | Reissue filing fee | |
| 1005 180 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) (\$) 0.00 | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | |
| Total Claims | Extra Claims | Fee from below | Fee Paid |
| Independent Claims | -20** = | X | |
| Multiple Dependent | -3** = | X | |
| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
| 1202 18 | 2202 9 | Claims in excess of 20 | |
| 1201 86 | 2201 43 | Independent claims in excess of 3 | |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid | |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent | |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) (\$) 0.00 | | | |
| **or number previously paid, if greater; For Reissues, see above | | | |
| | | Other fee (specify) | |
| | | *Reduced by Basic Filing Fee Paid | |
| | | SUBTOTAL (3) (\$) 0.00 | |

| | | | |
|---------------------|--------------------|-----------------------------------|--------------|
| SUBMITTED BY | | (Complete if applicable) | |
| Name (Print/Type) | Winston Hsu | Registration No. (Attorney/Agent) | 41,526 |
| Signature | <i>Winston Hsu</i> | Telephone | 886289237350 |
| | | Date | 5/12/2004 |

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PATENT

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MAY 14 2004

TC/A.U.: 2182

5 Applicant: Chuang, Ko-Chien
Examiner: Perveen, Rehana
Filing Date: 05/21/2002
Application No.: 10/063,885
Confirmation No.: 2359
10 Docket No.: CEIP0041USA
Customer No.: 27765

OFFICIAL

Title: PERSONAL DIGITAL ASSISTANT SYSTEM

15 To: Commissioner for Patents
P.O. BOX 1450
Alexandria, VA 22313-1450

Subject: Response to the office action dated 02/26/2004

20

Dear Sir/Madam:

In response to the Office action of 02/26/2004, please amend
the above-identified application as follows:

25

Amendments to the Claims are reflected in the listing of claims
that begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

30